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CONFIRMATION NO. 6598

<b>SERIAL NUMBER</b> 10/696,108	<b>FILING OR 371(c) DATE</b> 10/29/2003 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1625	<b>ATTORNEY DOCKET NO.</b> 56200US041
<b>APPLICANTS</b> Joseph F. Dellaria, Woodbury, MN; John W. Mickelson, Mattawan, MI;				
<b>** CONTINUING DATA *****</b> This application is a CON of 10/165,750 06/07/2002 PAT 6,677,348 which is a CIP of 10/013,202 12/06/2001 PAT 6,670,372 which claims benefit of 60/254,218 12/08/2000				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** 03/22/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <input checked="" type="checkbox"/> Allowance Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 8
				<b>INDEPENDENT CLAIMS</b> 7
<b>ADDRESS</b> 32692				
<b>TITLE</b> ARYL ETHER SUBSTITUTED IMIDAZOQUINOLINES				
<b>FILING FEE RECEIVED</b> 1414	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	